

## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM
(Type or Print Clearly)

Apr 2005

			(Тур	e or Print C	clearly)		U
	BBYIST						
NAME(Last)		(First)			(Middle)		TELEPHONE
	Okudara	Jon		T.	,		488-3533
MAILING ADDR						:	FAX
	99-1362 Palaialii Pl.	in the	. 4.				
(City)			(State)			(Zip	Code)
	Aiea		НІ		. 9	6701	
EMPLOYING OR	GANIZATION (Fill in only if yo	u are emplo	yed by a bus	iness entity v	vhich has been reta	ined to lobby)	TELEPHONE
	Okudara & Associate	s, Inc.			. :		534-1244
MAILING ADDR	ESS (Street)			·			FAX
	333 Queen St, #902		* + - + + 2	.*	es established and the second		534-1247
(City)			(State)			(Zip	Code)
(City)	•		(-,,			96813	,

PART II ORGANIZATION				
NAME OF ORGANIZATION YOU LOBBY F		TELEPHONE		
Touchstone Tele		818-460-5767		
MAILING ADDRESS (Street)				FAX
500 S.Buena Vis	818 -460-5969			
(City)	(State)		(Zip C	ode)
Burbank	CA		91521	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT				TELEPHONE
Mark Mazie	· ·			818-460-5767
MAILING ADDRESS (Street)	•			FAX
500 S.Buena Vis	ta, Street			818-460-5969
(City)	(City) (State) (2		(Zip C	ode)
Burbank CA			91521 RECEIVED BY U.S. MAIL	

PART III DESCRIPTION	OF SUBJECTS UPON WHICH	YOU EXPECT TO LOBBY	
Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	Tourism & Recreation
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	Planning, Land & Water Use Management	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.

PART IV CERTIFICATION OF LOBBYIST

Am J	- aludara	•	2/28/06	
(Sig	nature of Lobbyist)	(Date)		
PART V AUTHORIZATION TO	DLOBBY			
NAME		AUTHORIZING OFFI	ICER OR PERSON REPRESENTED	
Mark Mazie		VP Legal Affairs		
NAME OF ORGANIZATION (if applicab	e)		TELEPHONE	
Touchstone Televis	ion Productions, LLC		818-460-5767	
MAILING ADDRESS (Street)			FAX	
500 S.Buena Vista	Street		818-460-5969	
(City)	(State)	(Zip (	Code)	
Burbank	Burbank CA		91521	
I hereby authorize the above	e - named person to engage in lobb	ying activities on l	behalf of the undersigned.	
mak maxie		3-21-06		
(Signature of Authoriz	ring Officer or Person Represented)	(Date)		